



PATENT APPLICATION
Attorney Docket No: 678-756 (P9786)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: SHINICHI, Haruyama

GROUP ART UNIT: 2614

APPLN NO: 10/037,194

EXAMINER: JAMAL, Alexander

FILING DATE: November 9, 2001

DATED: March 1, 2007

FOR: **PORTABLE COMMUNICATION TERMINAL
WITH REDUCED SPECIFIC ABSORPTION RATE**

Mail Stop: Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of the United States Patent and Trademark Office dated December 8, 2006, please consider the following amendments and remarks.

Please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims that begin on page 2 of this paper.

Remarks begin on page 4 of this paper.

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8 (a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Mail Stop Amendment, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 1, 2007.

Dated: March 1, 2007



Thomas L. Schoeffler



IFW 2614

PATENT APPLICATION
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Applicant(s): SHINICH, Haruyama

Examiner: JAMAL, Alexander

Serial No.: 10/037,194

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P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

[] Small entity status of this application under 37 C.F.R. §§1.9 and 1.27 has been established by a verified statement previously submitted.

[] A verified statement to establish small entity under 37 C.F.R. §§1.9 and 1.27 is enclosed.

No additional fee is required.

For	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate (Small Entity)	Addit. Fee	Rate	Addit. Fee
TOTAL CLAIMS*	6	20	0	x 25 =	\$0	x 50 =	\$0
INDEPENDENT CLAIMS	3	3	0	x100 =	\$0	x200 =	\$0
<input type="checkbox"/> First Presentation of Multiple Dep. Claim				180		360	\$0

* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: March 1, 2007



Thomas C. Schoeffler

Please charge Deposit Account No. 50-4053 in the amount of \$___. Two (2) copies of this sheet are enclosed.

A check in the amount of \$__ is enclosed.

Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. §§1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-4053. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-4053 therefor. A DUPLICATE OF THIS SHEET IS ENCLOSED.

Respectfully submitted,



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Attorney for Applicant(s)

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